The Effect of the Severity of Preoperative Leg Pain on Patient Reported Outcomes, Minimum Clinical Important Difference Achievement, and Patient Satisfaction Following Minimally Invasive Transforaminal Lumbar Interbody Fusion

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INTRODUCTION: Prior literature has associated patient satisfaction following surgery to patient perception of progress in specific quality of life domains, notably disability, physical function, and pain. It remains unclear, however, if preoperative severity of pain influences patient satisfaction postoperatively. We aim to compare patient-reported outcomes (PROMs), patient reported satisfaction, and Minimum Clinical Important Difference (MCID) achievement following minimally invasive transforaminal lumbar interbody fusion (MIS TLIF) in patients stratified by preoperative leg pain.

METHODS: A surgical database was retrospectively reviewed for lumbar procedures between November 2005 and March 2021. Inclusion criteria were set as primary, elective, single MIS TLIF procedures for degenerative spinal pathology. Patients undergoing a revision procedure, or surgery indicated for infectious, malignant, or traumatic etiologies were excluded. Patients were grouped into two cohorts, dependent on preoperative VAS leg scores of ≤7 or >7. Patient demographics, perioperative characteristics, PROMs, and patient reported satisfaction scores were collected. PROMs were administered at preoperative and various postoperative time points, including Patient-Reported Outcomes Measurement Information System Physical Function (PROMIS-PF), Visual Analogue Scale (VAS) for back and leg pain, Oswestry Disability Index (ODI), 12-Item Short Form Physical Composite Score and Mental Composite score (SF-12 PCS/SF-12 MCS). Patient satisfaction scores were collected for VAS back and leg pain and ODI at postoperative time points. Mean PROM scores were compared between cohorts at each time point utilizing a two-sample t-test. Postoperative PROM improvement from the preoperative baseline within each cohort was calculated with the use of paired t-test. MCID achievement was determined by comparing ΔPROM scores to previously established threshold values. Rates of MCID achievement were compared among groups via chi square analysis. Postoperative satisfaction scores at each time point were compared between cohorts using a Student's t-test.

562 patients were eligible with 168 patients in the VAS leg Preoperative ≤7 cohorts. Demographic differences between cohorts were observed for age and smoking status (p≤0.044, all). A greater proportion of patients in the VAS leg Preoperative ≤7 cohorts had a preoperative diagnosis of foraminal stenosis (p≤0.001). Postoperative inpatient VAS pain score on day 0 was greater for patients in VAS leg preoperative >7 cohort (p<0.038). Postoperative narcotic consumption on day 0 and 1 was noted to be significantly greater in VAS leg Preoperative >7 cohort. Preoperative PROM scores were different for the following PROMS at the following timepoints: SF-12 MCS, VAS back, and VAS leg (p <0.008, all). Differences in postoperative mean PROMs were demonstrated: PROMIS-PF at 6 weeks and 2 years, SF-12 PCS at 6 weeks and 2 years, SF-12 MCS at 6 weeks, 12 weeks, 6 months, and 1 year, VAS back at 6 weeks, 12 weeks, and 6 months, VAS leg at 6 weeks, 12 weeks, 6 months, and 2 years and ODI at all postoperative time points (p<0.045, all). Patients in the VAS leg Preoperative >7 cohort demonstrated a greater proportion of achieving MCID for VAS leg at all postoperative time points and for ODI at 12 weeks (p <0.010, all). Patients in the VAS leg Preoperative ≤7 cohort demonstrated a greater proportion achieving MCID for PROMIS-PF at 2 years and for SF-12 PCS at 2 years. Postoperative satisfaction was greater in the VAS back preoperative ≤7 cohort for the following PROMs at the following timepoints: VAS leg at 6 weeks, 12 weeks, 6 months, and 2 years, VAS back at 12 weeks and 2 years, and ODI at 6 weeks, 12 weeks, 6 months, and 2 years (p<0.046, all).

DISCUSSION AND CONCLUSION: Patients with severe preoperative leg pain demonstrated significantly worse postoperative PROM scores for the majority of PROMs at most time points and *significantly worse patient satisfaction* for disability, back and leg pain at multiple time points. MCID achievement rates across cohorts were similar for the majority of PROMs at the majority of postoperative time-points. This may suggest patients with severe preoperative pain have unrealistic expectations for benefits of surgery influencing their corresponding satisfaction postoperatively.

Characteristic	Total (n=562)	VAS leg Pre ≤7 (n+168)	VAS leg Pre >7 (n=294)	*p-value
Age (mess + SD, years)	51.9 ± 11.5	53.4 ± 10.6	51.3 ± 11.9	0.044
IOMI (mean a SD, kg/m²)	30.6 ± 6.2	30.2 ± 6.03	30.92 ± 6.32	0.134
Gender				0.106
l'emale	37.2% (209)	32,1% (54)	39.3% (155)	
Male	62,8% (353)	67.8% (114)	60.7% (239)	
Ethnicity				0.120
Caucasian	68.3% (388)	73.8% (124)	67.4% (264)	
African American	12.9% (72)	10.7% (18)	13,8% (54)	
Hispanio	12,7% (71)	8.3% (14)	14.5% (57)	
Asian	1.4% (0)	2,4% (4)	1.0% (4)	
Other	3.8% (21)	4.8% (8)	3.3% (13)	
Diabetic States				0.296
Nen-Diabetic	87,5% (492)	88.1% (148)	87.3% (344)	
Disbetic	12,5% (70)	11.9% (20)	12,7% (50)	
Smoking Status				<3.001
Non-Smoker	80.2% (450)	89.2% (149)	76.4% (301)	
Senoker	19.8% (111)	10.8% (18)	23,6% (93)	
Hypertonsion Status				0.077
Non-hyportensino	61.3% (343)	66.8% (111)	58.9% (232)	
Hypertensive	38.8% (217)	33.1% (55)	41.1% (162)	
ASA Classification				0.694
<2	81.3% (451)	80.3% (130)	81.7% (321)	
>2	18.7% (104)	19.8% (32)	18.3% (72)	
OCI Score (mean a SD)	2.1 ± 1.9	2.0 ± 1.8	2.2 ± 2.0	9.177
Insurance				0.057
Medicare/Medicaid Workers'	9.6% (54)	5.0% (8)	11.7% (46)	
Compensation	40.5% (228)	34.0% (57)	43.4% (171)	
Private	49.8% (288)	61.3% (100)	44.9% (177)	

Characteristic	Total (n=562)	VAS log Pro ≤7 (n=168)	VAS log Pro >7 (n=394)	*p-valu
Spinal Pathology				
HINP	20.1% (113)	25.0% (42)	18.0% (71)	0.05
Degenerative Spond	62.5% (351)	66.1% (H1)	60.9% (240)	0.24
Forgrainal Stenesis	25.3% (142)	46,4% (78)	16.2% (64)	< 0.00
Cantral Stenonis	84.8% (477)	87.5% (147)	83.8% (330)	0.25
Operative Levels				0.57
1.1-2	0.2% (1)	0.0% (0)	4.2% (I)	
12-3	0.7% (4)	0.014 (00)	1.0% (4)	
13-4	4.3% (24)	4.2% (7)	4.3% (17)	
1.4-5	53.9% (303)	\$7,1% (96)	52,5% (207)	
1.5-61	40.9% (230)	38.7% (65)	41.9% (145)	
Spensive Time	120.8 ±			
(Moan ± SD; min)	35.8	122.5 ± 29.3	120.0 ± 38.2	0.4
Estimated Blood Less				
(Mean ± SD; mL)	61.3 ± 57.1	54.1 ± 50.2	63.7 ± 58.9	0.08
Length of Stry				
(Mean ± SD; hours)	45.4 = 32.9	31.7 ± 29.7	55.4 ± 34.5	+0.00
Printoporative VAS pain				
PODe	52+18	49+19	5.3 ± 1.8	0.07
90D 1	47±16	4.6 ± 1.7	47±16	0.55
Pestoperative Narcotic Consumption				
POD 0	\$5.1 ± 71.3	55.1 ± 29.7	99.5 ± 77.6	-10.00
POD 1	68.7 ± 78.1	41.5 ± 32.8	78.1 ± 86.6	< 0.00
1-year Arthrodesis (%)	86,3% (429)	84,9% (197)	86.8% (322)	

PROM	VAS leg Pre <7 Moss a SD	VAS by <7 Foot-operative Improvement	VAS log Pre >7 Mean n.SD	VAS log >? Protoperative Improvement	*p-value
12-wedo		-0.001		<0.001	
			42.84 9.8 (27)		
2-year	3.2 ± 2.7 (34)	-0.001	42±38-060	<0.00E	0.138
hooperative	4.1 = 2.3 (144)		8.4 ± .97 (119)		<8.091
6-months		-6.061		-0.961	
	2.1 = 2.6 (34)	-0.001	5.6 ± 2.8 (36)	<0.001	0.817
1-rest					
2-year	28.9 ± 26.3 (36)	<5.051	29.8 ± 28.5 (35)	<0.861	0.845

PROM	VAS leg Pre ≤ 7	VAS leg Pre >7	*p-valt
	(%)	(%)	
ODI			
6-weeks	27.3%	36.0%	0.16
12-weeks	32.2%	53.8%	0.00
6-months	55.1%	58.3%	0.64
1-year	54.4%	58.3%	0.68
2-year	50.0%	60.9%	0.40
Overall	60.9%	67.2%	0.29
PROMIS-PF			
6-weeks	12.5%	17.1%	0.51
12-weeks	31.2%	31.4%	0.97
6-months	44.3%	48.5%	0.69
1-year	51.1%	43.3%	0.50
2-year	55.0%	39.1%	0.02
Overall	58.9%	54.0%	0.57
SF-12 PCS			
6-weeks	25.9%	31.3%	0.45
12-weeks	51.6%	46.2%	0.52
6-months	58.4%	51.9%	0.46
1-year	66.1%	63.8%	0.80
2-year	75.6%	58.6%	0.01
Overall	68.5%	63.1%	0.43
SF-12 MCS			
6-works	26.7%	30.0%	0.65
12-meeks	25.8%	34.6%	0.25
6-months	28.6%	40.4%	0.16
1-year	25.4%	40.4%	0.10
2-year	26.8%	27.6%	0.94
Overall	43.1%	51.2%	0.26
VAShark			
6-weeks	52.1%	57.0%	0.35
12-weeks	51.3%	58.5%	0.17
6-months	53.9%	58.1%	0.43
1-year	52.6%	66.7%	0.14
2-year	55.3%	58.6%	0.78
Overall	68.6%	75.8%	0.10
VAS Leg			
6-weeks	37.5%	67.4%	<0.00
12-weeks	41.0%	73.3%	<0.00
6-months	41.4%	68.3%	< 0.00
1-year	39.3%	64.6%	0.01
2-year	34.2%	82.6%	<0.00
Overall	56.5%	83.0%	<0.00

leg Pre >7 (%)	*p-value	PROM	VAS leg < 7 (Mean ± SD)	VAS leg Pre >7 (Mean ± SD)	*p-value
		VAS leg			
36.0%	0.163	6-weeks	7.7 ± 2.9	5.0 ± 3.9	0.019
53.8%	0.002	12-weeks	7.6 ± 2.6	5.4 ± 1.0	0.039
58.3%	0.646	6-months	7.3 ± 3.2	5.2 ± 4.7	0.041
58.3%	0.685	1-year	6.4 ± 3.5	6.9 ± 3.8	0.651
60.9%	0.409	2-years	6.0 ± 4.2	3.2±4.1	0.012
67.2%	0.297	VAS back			
		6-weeks	7.3 ± 2.6	5.8 ± 3.4	0.111
17.1%	0.514	12-weeks	7.4 ± 2.1	5.2 ± 3.8	0.021
31.4%	0.977	6-months	6.1 ± 3.4	5.4 ± 4.0	0.522
48.5%	0.695	1-year	7.0 ± 3.3	5.9 ± 3.8	0.371
43.3%	0.509	2-years	7.5 ± 2.8	4.1 ± 4.7	0.033
39.1%	0.023	ODI			
54.0%	0.579	6-weeks	7.0 ± 2.1	5.0 ±3.2	0.027
		12-weeks	7.2 ± 1.8	5.4 ± 3.6	0.033
31.3%	0.458	6-months	7.0 ± 2.6	4.8 ± 4.0	0,046
46.2%	0.528	1-year	7.4 ± 2.4	6.3 ± 3.5	0.258
51.9%	0.465	2-years	7.0 ± 2.9	4.0 ± 3.5	0.028
63.8%	0.807		cates statistical sin		01020
58.6%	0.013		ulated using Stud		
63.1%	0.431	-p-values case	unated using Stud	ent a t-test	
30.0%	0.653				
34.6%	0.258				